

PTO/SB/01 (10-01)

Approved for use through 10/31/2002. OMB 0501-0228
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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)	<input checked="" type="checkbox"/> Declaration Submitted with Initial Filing	OR	<input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)
	Attorney Doctel Number		
	First Named Inventor Kevin J. Harrington		
	COMPLETE IF KNOWN		
	Application Number		
	Filing Date		
Art Unit			
Examiner Name			

As the below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

SYSTEM AND METHOD FOR AUTOMATED BUILDING INCIDENT RESPONSE

(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which becomes available between the filing date of the prior application and the national or PCT International filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 366(a) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 366(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application (Number(s))	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto.

Page 1 of 2

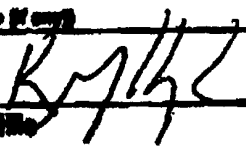
Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

PTC/BB/01 (10-01)

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U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Patent Reduction Act of 1992, no patent can be issued in a field of invention unless it contains a valid case control number.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input checked="" type="checkbox"/>		Customer Number or Bar Code Label: <input type="text"/>		OR <input checked="" type="checkbox"/>		Correspondence address below	
Name Kathleen Chapman							
Firm DISHONG LAW OFFICES							
Address 40 Bryant Rd.							
Jeffrey				NH		03452	
City				State		ZIP	
USA				803-678-4993		775-218-4407	
Country				Telephone		Fax	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
NAME OF SOLE OR FIRST INVENTOR: <input type="checkbox"/>				A petition has been filed for this unsigned inventor			
Given Name (first and middle if any) Kevin J.				Family Name or Surname Harrington			
Investor's Signature 				Date 07/11/2003			
Marstone Mills				MA		USA	
Residence City				State		Country	
P.O. Box 63							
Mailing Address Marstone Mills				MA		02848	
City				State		ZIP	
USA						Country	
NAME OF SECOND INVENTOR: <input type="checkbox"/>				A petition has been filed for this unsigned inventor			
Given Name (first and middle if any)				Family Name or Surname			
Investor's Signature				Date			
Residence City				State		Country	
Mailing Address							
City				State		ZIP	
USA						Country	
<input type="checkbox"/> Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTC/BB/82A attached hereto.							

PTO/USPO 88-001
Approved for use through 11/03/2003. OMB 8801-0001
U.S. Patent and Trademark Office U.S. DEPARTMENT OF COMMERCE
Under the Patent and Trademark Act of 1980, an inventor or assignee is required to submit a statement of information when a utility patent application is filed.

POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM	Applicant Number	
	Filing Date	July 11, 2003
	First Named Inventor	Kevin J. Harrington
	Title	System and Method for Automated Building Incident Response
	Attorney	
	Attorney Contact Number	882121-2882

Thereby appoint:

☐ Practitioner at Customer Number:

OR

☒ Practitioner(s) named below:

Name	Registration Number
Kathleen Chanman, Esq.	46,094
George W. Dinkens, Esq.	31,348

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to conduct all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

☐ The above-mentioned Customer Number:

OR

☐ The address associated with Customer Number:

OR

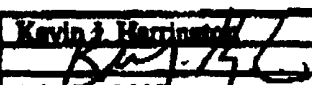
<input checked="" type="checkbox"/> Firm or Individual Name	Kathleen Chanman, Esq.		
Address	Dinkens Law Offices		
Address	40 Bryant Rd.		
City	Jeffrey	State	NY
Country	USA		
Telephone	603-878-4993	Fax	775-318-4407

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 2.71.
Statement under 37 CFR 2.73(b) is enclosed. (Form PTO/USPO)

SIGNATURE of Applicant or Assignee of Record

Name	Kevin J. Harrington		
Signature			
Date	July 11, 2003	Telephone	603-878-4407

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representatives are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 1 forms are submitted.

This collection of information is required by 37 CFR 1.31 and 1.32. The information is required to obtain or retain a benefit by the public which is to be sold by the USPTO to practice an invention. Confidentiality is governed by 36 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form under suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1480, Alexandria, VA 22313-1480. DO NOT SEND FIRM OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1480, Alexandria, VA 22313-1480.

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